Supplemental Application Data Sheet

Application Information

Application number:: 10/052,092

Filing Date:: January 18, 2002

Application Type:: Regular

Subject Matter:: Utility

Suggested Group Art Unit:: N/A

CD-ROM or CD-R?:: None

Sequence submission?:: none

Computer Readable Form (CRF)?:: No

Title:: METHODS AND COMPOSITIONS IN

BREAST CANCER DIAGNOSIS AND

THERAPEUTICS

Attorney Docket Number:: HO-P02102US2

Request for Early Publication?:: No

Request for Non-Publication?:: No

Small Entity?:: Yes

Petition included?:: No

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Suzanne

Family Name:: Fuqua

City of Residence:: Sugar Land

State or Province of Residence:: TX

Country of Residence:: US

Street of mailing address:: 5410 Drakeview Court

City of mailing address:: Sugar Land

State or Province of mailing address:: TX

Country of mailing address::

US

Postal or Zip Code of mailing address::

77479

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

Full Capacity

Given Name::

Peter

Family Name::

O'Connell

City of Residence::

Houston

State or Province of Residence::

ΤX

Country of Residence::

US

Street of mailing address::

3821 Jack Street

City of mailing address::

Houston

State or Province of mailing address::

TX

Country of mailing address::

US

Postal or Zip Code of mailing address::

77006

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

Full Capacity

Given Name::

D. Craig

Family Name::

Allred

City of Residence::

Houston

State or Province of Residence::

TX

Country of Residence::

US

Street of mailing address::

4249 Greeley Street

City of mailing address::

Houston

State or Province of mailing address::

TX

Country of mailing address::

US

Postal or Zip Code of mailing address::

77006

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

Full Capacity

Given Name::

Torsten A.

Family Name::

Hopp

State or Province of Residence::

TX

Country of Residence::

US

Street of mailing address::

3514 Chatwood Drive

City of mailing address::

Pearland

State or Province of mailing address::

TX

Country of mailing address::

US

Postal or Zip Code of mailing address::

77584

Correspondence Information

Correspondence Customer Number::

26271

Phone number::

(713) 651-3735

Fax number::

(713) 651-5246

E-Mail address::

msistrunk@fulbright.com

Representative Information

Representative Customer Number::

26271

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	60/262,990	January 19, 2001
This Application	Non-Provisional of	60/304,018	July 9, 2001